

Letters to the Editor



We welcome any brief comments on articles published in the Journal or other information of interest to readers. Letters selected for publication that comment on published articles will be forwarded to the original authors of those articles. Final approval of letters to be published remains with the Editor. Please note that only letters of 300 words or less will be considered for publication. Please send your letter to: pjtdv@sun.ac.za or P.O. Box 19063, Tygerberg, 7505

Fifth year medical student's elective year and future plans

To the Editor: As part of the old curriculum, the School of Medicine (Faculty of Health Sciences, University of the Free State) expected 5th year students to do a mandatory elective period. The period was spent in hospitals or practices and could be divided into two equal residency periods. The total elective period was two weeks. After each residency the student and doctor submitted a report used in evaluating the student. There is no clear profile of the elective period or of the problems experienced by the students. Therefore, the aim of the study was to determine aspects of the students' elective year and recommend improvements.

This was a descriptive study where the elective reports (students and doctors) and structured interviews were used as a quantitative measure. The researcher interviewed students in groups of up to seven. The evaluation was mandatory and all 5th year students were included. The process was explained to the groups, and oral consent was received. Questionnaires were analysed and the recommendations were formulated.

One hundred and six students took part in the study. All the students felt

that the elective period must continue and 105 (99%) students enjoyed their elective period. No students spent their residency in more than two places, 47% in two places, and 53% in one place. Students' underwent their elective period in hospitals (57.4% city, 9.6% rural) and practices (20.4% city, 12.5% rural).

Most students (71.7%) indicated that they had no problems with the elective residency. The problems that were mentioned included:

- December is a time of practice down sizing.
- Elective books were not always understandable.
- Choice of practice.
- Two weeks residency too long.
- Practitioners were unhappy that they did not receive CPD recognition.
- Some students had problems seeing patients.
- Two elective residencies.

All students but one (99.06%) thought that the intern year was necessary. Slightly less students (92.5%) thought the community service year was necessary. Eighty-seven (82.1%) students indicated that they were going overseas after their community service year. The time spent overseas is given in table 1.

More than half (63.2%) the students wanted to specialise and 41.5% wanted to stay general practitioners (Six students wanted to specialise after being general practitioners for a time). The elective period positively influenced 48.1% of the students to decide about their future as doctors. Some students (14.2%) indicated that they would follow alternative careers and 6.6% said that they would not just want a medical career.

Table 1. Time spent overseas (n = 87)

Time period	Percentage
0-3 months	2.3
4-6 months	0
7-12 months	28.7
13-24 months	49.4
25 months - 5 years	10.3
Permanent	2.3

Most students (71.7%, n=106) thought doctors did not earn enough (88.2% indicated that doctors in the public sector did not earn enough). More than a quarter (27.4%) of the students indicated that they want to be involved with the School of Medicine's official academic activities after qualification.

The following proposals to improve the elective period were made: Improved control of the input of doctors, set defined aims for students, implement earlier patient exposure, incorporate time of residency better into total study curriculum, acknowledge doctors involved in elective programme and address perception of working overseas.

The following recommendations can be made:

- Doctors involved in elective residency and evaluation must receive CPD points.
- The students' positive experience and feedback must be marketed with junior students.
- The elective period has value and must continue.
- Students should choose from a maximum of two places for residency.
- Specific complaints must be looked into to determine whether actions or an implementation programme are needed.
- The elective handbook and what is expected of the student and administrator must be explained.
- The group doing elective must be schooled to administer and handle the process.
- Students must be encouraged to spend more elective periods in practices.
- Students must receive pertinent information about why it is important to do elective periods in the December holiday.
- To identify hospitals and practices for possible elective facilities.
- Improve patient contact.
- Market the advantages of the intern and community service year.
- The movement of young doctors to overseas opportunities must be seen in perspective. The main reason for the move is that junior doctors earn more money with which they are able to pay study debt. More than two thirds of the group who wanted

Letters to the Editor

to work overseas indicated that they would return within 24 months to work as practitioners in South Africa. The challenge facing the government is to create competitive and lucrative careers in the public service for junior colleagues who are returning.

- The specialist/general practitioner ratio must be researched to determine if the needs of the country are fulfilled. The "HPCSA" must appoint and control specialist positions according to need, which

is scaled on a strategic plan.

- The perception and observation of practitioners' remuneration in South Africa needs immediate attention. The students' attitude toward public service doctors' remuneration is especially worrisome. This confirms the important role of senior practitioners as role models and how their underlying unhappiness manifests in the students' perception.
- The amount of people who want to be involved in official academic activities is heartening. Universities

with Medical schools will have to find ways to attract as many people possible on a fulltime or even part time basis so that human resources are optimally used.

- The education structure must be made aware of the recommendations so that they may be included in planning undergraduate training.

Prof GJ van Zyl

Faculty of Health Sciences
University of the Free State
vanzylgj.MD@mail.uovs.ac.za

PARTNERS IN PRACTICE

12TH NATIONAL FAMILY
PRACTITIONERS
CONFERENCE
8-10 AUGUST 2003